## **BEST AVAILABLE COPY**

DATENT ADDI (CATION SEE DETERMINATION SEC								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									W653525					
CLAIMS AS FILED - PART I									SMALL ENTITY OTHER THA					
Ļ			(Column 1)			(Column 2)			TYPE		OR	SMALL		
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	1	RATE	FEE	
BASIC FEE										345.00	OR		690.00	
TOTAL CLAIMS			41 minus 20=			• 21			X\$ 9=		OR	X\$18=	378°	
INDEPENDENT CLAIMS			. Ø minus 3 =			•			X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		1	+260=			
• If	* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1068	
_   CLAIMS AS AMENDED - PART II									IVIAL		OR			
_5	5/10/04		umn 1)			olumn 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
AMENOMENT A		REM Al	AIMS IAINING FTER NOMENT	in The state of th	PRE	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	. 2	+1	Minus		4/	= /		X\$ 9=		OR	X\$18=		
AME	Independent	•	3	Minus	***	3	3	ľ	X39=		ОП	X78=		
┝	FIRST PRESE	NIAII	)N OF MU	JLTIPLE DE	PENU	ENT CLAIM	<u>'</u>	Ī	+130=			+260=		
								L	+130=		OR	+20U=		
		<b>10</b> - 1	. 4				·	A	DDIT. FEE		OR ,	ADDIT. FEE	<u>'</u>	
<u> </u>		CL	umn 1) AIMS	Towns Service	Н	olumn 2) IIGHEST	(Column 3)	r		4001	. ,		- 221	
AMENDMENT B		AF	AINING TER NDMENT	7.4 Z	PRE	IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Q	Total	٠		Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	•		Minus	***		=	Γ	X39=		OR	X78=		
$\vdash$	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=			+260=		
	•							L	TOTAL		OR	TOTAL		
								A	DDIT. FEE		OR	ADDIT. FEE		
	is the company		umn 1)			olumn 2) IGHEST	(Column 3)	,-				•		
AMENDMENT C		REM. AF	AINING TER IDMENT		NI PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	•		Minus	••		<b>⇒</b>	Γ	X\$ 9=		OR	X\$18=		
ME	Independent	•		Minus	***		2	F	X39=			X78=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								700-		OR	X/0=		
	* If the ontor in column 1 is loss than the ontor in column 2 write *** in selimn 2										OR	+260=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **OPTION OF TOTAL ADDIT. FEE														
	It the "Highest Nur The "Highest Num	noer Prev	nously Pak nously Pak	JO FOR IN THIS J For (Total or	s SPAC r Indepe	vc is less that andent) is the	ın 3, enter "3." 9 highest number			ropriate box				